Effective October 1, 2003													e e	
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY			OR	OTHER THAN SMALL ENTITY		
TOTAL CLAIMS			9					RATE		FEE		RATE.	FEE	
FOR			NUMBER FILED		NUMBE	R EXTRA		BASIC	EE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			7 minus 20=		· 0			X\$ 9	=		OR	X\$18=		
INDEPENDENT CLAIMS			minus 3 =		• 0			X43			OR	X86=		
MU	LTIPLE DEPEN	DENT CLAIM PR	RESENT		<u> </u>							.000		
* If the difference in column 1 is less than zero, enter *0* in column 2								+145		204	OR	+290=		
									L	381	OR	TOTAL OTHER	THAN	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)									LL	ENTITY	OR	SMALL	1	
AMENDMENT A.	,	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER DUSLY	PRESENT EXTRA		RAT	E .	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
OME	Total	• 5	Minus	 ∂	()	=		X\$ 9	= -		OR	X\$18=		
MEN	Independent	*)	Minus	***	3	=		X43	=		OR	X86=		
V	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145			OR	+290=		
·									TAL.		OR	TOTAL		
		(Column 1)		(Colu	mn 3)	(Column 3)		ADDIT. I	EE	L	Täü	ADDIT. FEE		
AMENDMENT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	EST BER OUSLY FOR	PRESENT EXTRA		RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total		Minus	**				X\$ 9	=	·	OR	X\$18=		
	Independent	•	Minus	***		.		X43	 =.		OR	X86=		
◀	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145		 	OR			
•								1	TAL		OR	TOTAL		
· .										L	1 0	ADDIT. FEE		
		(Column 1)	T		mn 2) REST	(Column 3)	1			ADD!	1		ADDI-	
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVI	MBER OUSLY FOR	PRESENT EXTRA		RAT	E	ADDI- TIONAL FEE		RATE	TIONAL FEE	
	Total	•	Minus	**		= .		X\$ 9	=		OR	X\$18=		
	Independent	*	Minus	***		=		X43	=		OR	V00		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										1			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. TOTAL OR TOTAL														
•	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***Of the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												L	
	The "Highest Nun	nber Previously Pa	id For (Total o	or Independ	dent) is the	highest number	er fo	und in th	е ар	propriate bo	x in co	olumn 1.		

Application or Docket Number